2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000712

FILED Jan 07, 2009 Secretary of State

Entity Name: SANDOR WIENER SCHOOL OF OPPORTUNITY, INC.

Current P	rincipal Place	of Business:	New Principal Place	of Business:
5555 BISC MIAMI, FL	33137			
Current Mailing Address:		New Mailing Address:		
5555 BISC MIAMI, FL	CAYNE BLVD 33137			
FEI Number	: 04-3614379	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
5555 BISĆ	MICHAEL CAYNE BLVD 33137 US			
	e named entity s e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida. É	submits this statement for the lic Signature of Registered Ag		ed office or registered agent, or both, Date
in the State	e of Florida. É	ic Signature of Registered Ag	ent	
in the State SIGNATUI OFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC	ic Signature of Registered Ag TORS: Delete LINI, HELEN E BLVD	ent	Date
in the State	e of Florida. RE: Electron S AND DIREC PD () SALAZAR-REAL 5555 BISCAYNI MIAMI, FL 3313	ic Signature of Registered Ag TORS: Delete LINI, HELEN E BLVD 37 Delete M DR. E BLVD	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIREC PD () SALAZAR-REAL 5555 BISCAYNI MIAMI, FL 3313 VD () KIRSH, WILLIAI 5555 BISCAYNI MIAMI, FL 3313	ic Signature of Registered Ag TORS: Delete LINI, HELEN E BLVD 37 Delete M DR. E BLVD 37 Delete LY E BLVD	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E MESSER ED 01/07/2009